

Jul 28, 2017

CJA 23
(Rev. 11/11)

FINANCIAL AFFIDAVIT

IN SUPPORT OF REQUEST FOR ATTORNEY, EXPERT, OR OTHER SERVICES WITHOUT PAYMENT OF FEE

SEAN F. McAVOY, CLERK

IN THE UNITED STATES DISTRICT COURT COURT OF APPEALS OTHER (Specify below)
IN THE CASE OF

V. _____

FOR _____
AT _____

| |
|-----------------|
| LOCATION NUMBER |
| |

PERSON REPRESENTED (Show your full name)

JOSE CERVANTES-VARGAS

CHARGE/OFFENSE (describe if applicable & check box →)

 Felony
 Misdemeanor

| |
|---|
| 1 <input checked="" type="checkbox"/> Defendant - Adult |
| 2 <input type="checkbox"/> Defendant - Juvenile |
| 3 <input type="checkbox"/> Appellant |
| 4 <input type="checkbox"/> Probation Violator |
| 5 <input type="checkbox"/> Supervised Release Violator |
| 6 <input type="checkbox"/> Habeas Petitioner |
| 7 <input type="checkbox"/> 2255 Petitioner |
| 8 <input type="checkbox"/> Material Witness |
| 9 <input type="checkbox"/> Other (Specify) _____ |

| |
|------------------------------------|
| DOCKET NUMBERS |
| Magistrate Judge |
| District Court CR-17-2038-SMJ-5 |
| Court of Appeals |

ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

| | | | | |
|---------------------------|--|--|--|--|
| EMPLOY- MENT | Are you now employed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Self-Employed Name and address of employer: <u>Field work</u> | | | |
| | IF YES, how much do you earn per month? \$ <u>1,500</u> | IF NO, give month and year of last employment? _____ How much did you earn per month? \$ _____ | | |
| | If married, is your spouse employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, how much does your spouse earn per month? \$ _____ | If you are a minor under age 21, what is the approximate monthly income of your parent(s) or guardian(s)? \$ _____ | | |
| INCOME & ASSETS | Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | | | |
| | OTHER INCOME | RECEIVED IF YES, give the amount \$ _____ received and identify the sources \$ _____ | SOURCES | |
| CASH | Do you have any cash on hand or money in savings or checking accounts? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, total amount? \$ _____ | | | |
| PROP- ERTY | Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, give value and description for each \$ _____ \$ _____ \$ _____ | VALUE DESCRIPTION | | |
| | DEPENDENTS | MARITAL STATUS Single Married Widowed Widowed Separated or Divorced | Total No. of Dependents 2 | List persons you actually support and your relationship to them <u>mother & niece</u> |
| OBLIGATIONS & DEBTS | DEBTS & MONTHLY BILLS (Rent, utilities, loans, charge accounts, etc.) | DESCRIPTION <u>Rent</u> <u>Utilities</u> <u>Food</u> | TOTAL DEBT \$ _____ \$ _____ \$ _____ \$ _____ | MONTHLY PAYMENT \$ 450 \$ 150 \$ 150 \$ 500 |

I certify under penalty of perjury that the foregoing is true and correct.

X JOSE CERVANTESSIGNATURE OF DEFENDANT
(OR PERSON REPRESENTED)7/28/17

Date